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Surgeon Chiropodist

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# OUR FEET

A TREATISE ON

## THE HUMAN FOOT

AND ITS CLOTHING

Showing the Injuries and Diseases to which it is Liable—such as Ingrowing Toe-Nails, Bunions, Corns, etc. Explaining Methods of Treatment which Each May Apply for Himself, and Describing the Correct Form of Shoe and Stocking to Insure Comfort.

WITH 25 ILLUSTRATIONS  
BY

CHAS. O. KAHLER,  
Surgeon Chiropodist

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Dr. P. KAHLER'S SONS  
BROADWAY, NEW YORK  
1903

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# TABLE OF CONTENTS 64

	PAGE
PREFACE .....	7
INTRODUCTION .....	8
CHAPTER I.—THE HUMAN FOOT—Ex- planation of its Structure—Strong, but Pliable—Fashion <i>versus</i> Common Sense —Care of the Feet of Children and Adults .....	11
CHAPTER II.—HARD CORNS—What they Are—The Cause—Where they Grow— Treatment for Ordinary Cases—When Much Inflamed—A Remedy for Use at Night—Temporary Relief—Case for Skilled Chiropodist or Physician.....	15
CHAPTER III.—SOFT CORNS—Their Na- ture—Where Found—First Symptom— Manner of Growth—To Get Rid of Them .....	20

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4 TABLE OF CONTENTS—Continued

	PAGE
CHAPTER IV.—VASCULAR CORNS—Of Rare Occurrence—Found on the Soles of the Feet and Toes—Meaning of Name—General Appearance—Best Way to Treat . . . . .	24
CHAPTER V.—THE TOE-NAILS—Their Use—Distortions—Suggestions for Cutting the Toe-Nails—Ingrowing Nails—Wrong Treatment, and Its Results—Way to Cure Ingrowing Nails—The Ancient Method—The Club Nail—Its Cause and Cure. . . . .	27
CHAPTER VI. — BUNIONS, DISLOCATED AND ENLARGED JOINTS —All Three Popularly Called Bunions—Cause of Bunions—Relief—Useless to Treat unless Proper Shoes or Stockings are Worn—Enlarged Joints Explained—Their Treatment—Dislocated Joints—Their Cure . . . . .	35
CHAPTER VII. — FLAT FEET—How Caused—Frequency of Occurrence—Shoes that Cause this Trouble—Prevention—Relief—Arch Supporters . . . . .	46

TABLE OF CONTENTS—Continued 5

PAGE

CHAPTER VIII.—GOUT, SPRAINS, AND CHILBLAINS—Origin of Gout—Relief for the Pain—Cause and Symptoms of Sprain—Treatment to be Used—Simple Chilblains—Their Cause—General Treatment Suggested. . . . . 51

CHAPTER IX.—DISEASES OF THE PERSPIRATION, AND COLD FEET—Fetid Odors—A Sure Cure—Cracking of Skin between the Toes—Treatment—Lack of Perspiration—Relief—Cold Feet—Aids to Defective Circulation. . . 57

CHAPTER X.—HOW TO BATHE AND DRESS THE FEET—Should be Bathed in the Evening—In Salt Water—Prescription for Brine—Hot or Cold Foot-Bath—Foot-Gear for Children—Stockings—Shoes—Effect of Foot-Clothing on Health—Bound Feet of Chinese Women—The Proper Shoe. . . 61

CHAPTER XI.—ADDITIONAL RECIPES AND THEIR USES—For Simple Chilblains—To Remove Corns—To Re-

6 *TABLE OF CONTENTS—Continued*

	PAGE
move Warts—To Remove Soft Corns— For Ingrowing Toe-Nails—For Per- spiring Feet—For Hard Corns.....	74
CHAPTER XII. — SUNDRIES — Abraham Lincoln—The Sandal Shoe—Right and Left Stockings—Foot and Stocking Cut Combined—Things not to do.....	80

## PREFACE



THE first edition of this work, having been revised and abridged, and also having received important additions, is now offered to the public in this volume.

We direct the attention of the reader to the importance of referring to the index, as the work has been prepared with the wants of the non-professional reader especially in view. By following this method, information sought can be found most readily; and by aid of the references, it is hoped that the reader will secure the assistance he needs.

In the preparation of the work, the author has carefully examined all the best material at his command, and freely used it, the special object being to have it abreast of the present knowledge on the subjects treated.

The volume also contains valuable recipes, and different antiseptics, salves, etc., which he uses in his own practice. These will be a great help to those who are afflicted with any of the ailments herein described.

## INTRODUCTION



REMARK made by a young lady in the hearing of the author was the incentive to this effort to correct some prevalent fallacies concerning the nature and origin of maladies of the feet. The observation related to a bunion, which the lady declared she "inherited from her parents."

This being by no means the first time that this and similar ideas had been expressed in his hearing, the idea of a treatise on the human foot and its ailments, and their proper treatment, presented itself. This book, which is written for the public at large, is designed to be a reference book of suggestion and help to the people, for the proper care of the feet and the treatment of maladies incident to them.

Dr. P. Kahler, now deceased, during a practice of forty years, built up for himself a name as a surgeon-chiropodist which will long be remembered by his grateful patrons, and during the last thirty years, the author of the following chapters studied and practiced the same under his tuition.



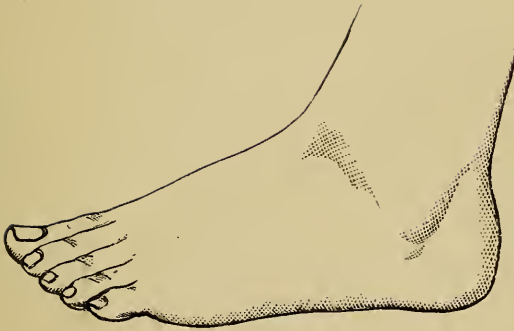
As a practical surgeon-chiropodist of thirty years' actual experience, and as a manufacturer of footwear of all kinds, the author feels justified in attributing ninety-five out of every hundred cases of ingrowing toe-nails, bunions, corns, and similar maladies, to the wearing of ill-fitting boots, shoes or stockings, and in asserting that the inheriting of ingrowing toe-nails, bunions and corns is improbable.

This was the opinion of his father, founded on a still larger experience, and the object of the author is to manifest this fact, and to show how, by proper treatment, and the wearing of boots and shoes made in harmony with the natural shape of the feet, these troublesome deformities and diseases, in time may be removed.

To those who suffer, and to those who would preserve sound and healthy feet, this work is respectfully dedicated.



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A healthy and perfect foot of an adult.



## Chapter One

## THE HUMAN FOOT

Explanation of its Structure—Strong, but Pliable—  
Fashion *versus* Common Sense—Care of the Feet  
of Children and Adults.

**T**HE skeleton or framework of the human foot is constructed of twenty-six bones, very beautifully arranged, and admitting of considerable movement at the various joints. These bones form the heel and the posterior section of the foot. They are irregular in shape, and vary in size from the os-calcis, which is about two and one-half inches long, to the smallest of the cuneiform bones, which is about three-quarters of an inch long, and one-half of an inch thick. They are held together at the joints or articulations by numerous ligaments of great strength, and while each joint is only slightly movable, the group of bones as a whole is flexible to a marked degree.

The metatarsal bones are about four inches long, and three-eighths of an inch in diameter.

(b) They articulate with the tarsal bones behind and with the phalanges in front. In shape they are very similar to each other and vary only slightly in size and length.

The phalanges (a) are the bones of the toes, each toe being supported by three, except the great toe, which has two. The phalanges of the first and second row resemble the metatarsal bones, but are smaller. The terminal or unguinal phalanges are flat, broad and rough on the distal or outer end for the support of the bed of the toenail.

To promote the elasticity of the foot and to enable this collection of small bones to support the weight of the body properly, the bones of the tarsus and metatarsus are arranged in the form of an arch, known as the plantar arch, and are held in that position by ligaments and the long tendon of one of the muscles in the calf of the leg. The name of the ligament is the calcaneo-navicular and the tendon is a continuation of the tibialis posticus muscle. These structures stretch across the concavity of the arch like a bow-string across a bow, and as the ligament is elastic, it tends to return to its original length each time it is stretched.

The posterior limb of the plantar arch is the

shorter, and rests on the os calcis or heel bone, which thus becomes one of the buttresses of the arch. The forward or anterior limb is about twice as long as the posterior one, and rests on the heads of the metatarsal bones.

The elasticity of the perfect arch prevents undue jarring of the body in walking, running and jumping; and when the ligaments are relaxed and the arch flattened out, the condition known as flat-foot exists.

The structure of the foot, from a mechanical point of view, is admirable, for while each joint allows only a limited amount of motion, yet, taken as a whole it is pliable and very strong.

For this reason it is of immense importance whether the shoe worn is broad or narrow, rounded or pointed, long or short, thick or thin soled. There is no other part of the body which receives such bad treatment as the foot. The dictates of unreasoning "Fashion" demand that the feet be crowded into foot-wear which does not fit them, the result being only what might be expected. The shoe should protect the foot, not distort it; and when fashion arrogates to herself the right to determine the shape of the feet, she steps outside of her province: and nature will revenge herself upon the willing slave of fashion

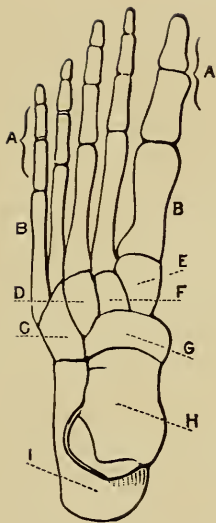
by the infliction of corns, bunions, ingrowing nails, and all sorts of kindred ailments.

Parents who care anything about the teeth of their children, and know what a trivial circumstance will cause decay, send the children to a dentist at regular intervals, and as a result the loss of teeth during middle life is prevented. There is no reason why a similar course should not be followed in the case of the feet. Children, if sent to a reliable surgeon-chiropodist at regular intervals to have their feet examined, and the toenails cut, will avoid many if not all of the ailments which are due to ill-fitting shoes or stockings, as he can tell at a glance when anything is the matter, and prevent any further progress of the trouble.

Even adults will find their feet greatly benefited by following this advice. So many intelligent men and women have become convinced of the wisdom of such a course, that before many years have passed the public will regard the chiropodist as important to their well-being as the physician or dentist.



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Skeleton of the Perfect Human Foot and  
their names, as follows


*A*—Fourteen Phalanges. *B*—Five Metatarsal. *C to I*—Seven Tarsal.  
*C*—Cuboid. *D, E and F*—Cuneiform bones. *G*—Navicular or Scaphoid.  
*H*—Astragalus. *I*—Os-calcis or Calcaneum.



## Chapter Two

## HARD CORNS

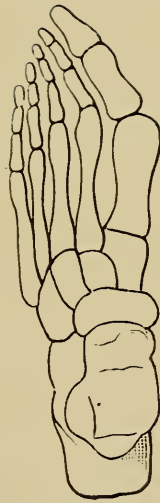
What they Are—The Cause—Where they Grow—Treatment for Ordinary Cases—When Much Inflamed—A Remedy for Use at Night—Temporary Relief—Case for Surgeon-Chiropodist or Physician.

O comprehend fully the nature of a hard corn, we must first understand the structure of the skin in which it develops. The skin is composed of an outer, horny layer, the epidermis, which contains no nerves or blood-vessels. Its nutritive supply is derived from the lymph-channels which connect with those of the next layer under it. This inner layer, the dermis or true-skin, contains the blood-vessels and the nerve-endings which endow us with the sense of touch. Beneath the dermis is the subcutaneous fat which serves to protect the body and render its contour pleasing.

A hard corn is the thickening of the epidermis,

which thickening sends off a small projection from its under surface down into the dermis. When, therefore, pressure is made on a corn, this projection is pressed downward into the dermis and causes severe pain by its irritation of the nerve-endings.

Hard corns are caused by pressure or friction of any kind, but chiefly that due to poorly fitting footwear. A wrinkled or darned stocking, a tight or a very loose shoe will almost invariably produce one or more corns. A loose shoe produces a corn by friction, and a tight one by pressure. When these growths are fully developed, they render walking a painful task, as nearly every step causes pain. Removal by the methods given below will give temporary relief, but unless the cause is removed, the corns will surely return. If they are neglected, the continued irritation will lead to inflammation and occasionally to the formation of pus. When this condition exists, as evidenced by redness, swelling, pain and heat, the treatment must first be directed to the reducing of the inflammatory condition, and afterwards to the radical cure of the corn. Unless the strictest cleanliness is observed, and antiseptic washes used, the inflamed corn may be the starting point for an attack of blood-poisoning, which will re-



Skeleton of the Foot when distorted.



quire a surgeon's attention and may even endanger life.

Hard corns are found most frequently on the outer surface of the fifth toe, and on the tops of the joints of the second, third and fourth toes. The tips of the toes are occasionally afflicted, and bunions, partially dislocated joints, enlarged joints, and hammer-toes are often complicated with them.

The following treatment is recommended for hard corns. First bathe the foot in a basin of hot water for about ten or fifteen minutes, drying it well at the expiration of that time. Moisten the corn thoroughly with a little spirits of ammonia (hartshorn) and with a corn knife pick or scrape up the edges of the callosity, which will be soft and easy to remove, being cautious not to cut deep enough to draw blood. Anoint the parts affected well with vaseline or any healing salve, and then bind them with a piece of old linen, keeping the binding on for a day or two. Remove at night and wear a very loose shoe at the time, so as to keep all pressure from the sore toes.

Should the corn be highly inflamed, so as to have the appearance of a fester, make a slippery-elm or flaxseed poultice and apply to the sore toe or toes before going to bed, keeping it on through

the night. In the morning remove the poultice and bathe the foot in warm water, drying thoroughly immediately after. Then with a dull knife pick the corn or callous as close as possible without drawing blood.

A washer must then be cut out of buckskin, or a number of thicknesses of chamois skin, with an aperture the full size of the corn, and applied with sticking-plaster. The thickness of this washer or shield must differ according to the height to which the corn has grown, so as to relieve the sore parts from all pressure. The aperture in the washer should be filled with Dr. Kahler's salve.

This treatment is mild and effective, and will rarely fail; but, as it sometimes occurs that the person afflicted is compelled to go out in all sorts of weather, necessitating the wearing of ordinary shoes, we give another remedy which can be employed at night, thus avoiding interference with daily employment, and which will relieve if not entirely eradicate the trouble.

A slice of lemon about the size of a five-cent piece, or if necessary, larger, can be bound over the corn for two or three nights, filing or scraping the callous parts off as much as possible, without causing the corn to bleed. Then wrap the toe up in old linen and keep the wrappings on for a few



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The foot tortured by hard corns, and distorted toes.



days, removing at night. The lemon can be applied as often as is found necessary to soften and loosen the corn. This remedy is entirely harmless.

Temporary relief can be secured by the following prescription, for the outlay of a few cents at the nearest drug store. Procure a camel's-hair brush and tincture of iodine, and paint the caloused spot. Wear an old shoe, cutting away any portion of the leather which would be likely to press on the corn.

Should the irritation have produced such serious inflammation that the remedies already given fail to give the desired relief, or should the corn be very badly ulcerated, the patient should consult a skilled chiropodist, or the family physician. Happily this is not often the case, as all ordinary corns will yield to the treatment given herein, at the same time remove all pressure or friction and the corn will disappear.

## Chapter ] Three

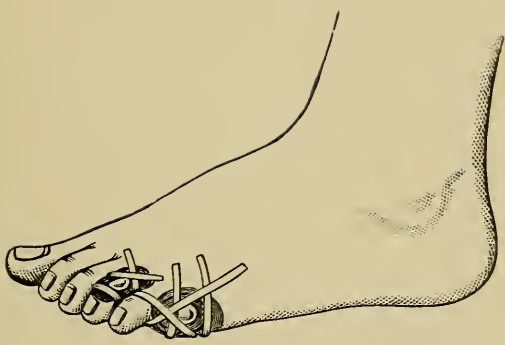
## SOFT CORNS

Their Nature—Where Found—First Symptoms—  
Manner of Growth—The Treatment.

**S**OFT corns are caused by the two great factors in the production of all corns—pressure and friction. In this case, however, the pressure is exerted by the head of one of the phalanges against the next toe. The corn thus started is, from its inception, bathed continually in perspiration and inevitably becomes soft and spongy. If neglected, the soft corn will develop a blister containing clear serum, and eventually the blister breaks, exposing the surface of the true-skin and an ulcer may form.

This class of corns is invariably found between the toes. Most frequently they are located between the fourth and fifth toes, sometimes between the third and fourth. It will be readily perceived that any corn developed in this situation will assume the characteristics of a soft corn, as a result of the constant presence of natural perspiration.

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Showing method of dressing corns located upon toes.



The first symptom of a soft corn is a sensation of burning between the toes. An examination rarely reveals any change in the appearance of the parts, but occasionally the inner surface of the toe presents a slightly reddened appearance. If, at this stage, no measures are instituted for the relief of the condition, the epidermis becomes thickened from the irritation, and separates from the dermis, forming a blister. The breaking of this blister exposes the surface of the true-skin, which is very tender, and the continued pressure causes the thickening of the epidermis, which presses on the dermis and gives rise to pain, which is almost unbearable, and may even cause nausea.

The fully developed soft corn feels like a piece of sand or a seed between the toes; although, in exceptional cases, are very flat.

The soft corn is never deeply set or rooted, and being subjected to the continual pressure of the surrounding toes, does not project much above the surface; and being of a spongy nature, similar to india-rubber, is not easily extracted with an ordinary knife.

The condition of the corn and its painfulness depend entirely upon its location, and the amount of pressure and moisture to which it is subjected. If the pressure be very great, it may produce in-

flammation and even suppuration, and the corn is then extremely painful. I have known of cases where the patient has been unable to attend to business or household duties, and even confined to the bed for several days. It has been at the least a fortnight before the regular shoe could be worn, on account of the swelling of the entire foot.

The best way to get rid of these pests, provided the corn be not too much inflamed, is to remove with a corn-knife or fine emery paper all the white or yellow skin. Before attempting this the foot should be bathed in hot water, as hot as can be borne, as this will remove much of the inflammation. Caution must be used in order to avoid causing the corn to bleed, as while the emery paper cuts imperceptibly it does so rapidly.

Should the parts be too highly inflamed, a poultice of bread and milk, or of slippery-elm, must be applied at night, and removed in the morning, when the foot should be bathed in warm water. This having been attended to, with a pointed knife pick off the white spot as much as possible, being cautious not to draw blood.

When the corn lies at the base of the toe, a small piece of absorbent cotton or sponge, saturated in spirits of camphor or lemon juice, must





Showing the great toe crowded beneath the other toe.




be applied during the day, repeating the application each morning until the corn has entirely disappeared. Should a little extra growth still appear, pick it out with the point of a knife, as heretofore instructed, and continue the application of Dr. Kahler's salve.

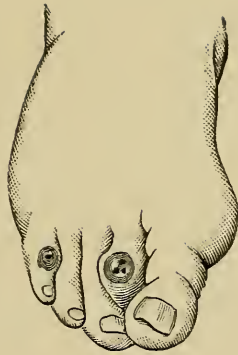
When the corn is located between the toes, at or near the joints, cut a washer of buckskin or chamois about the size of a five-cent piece, with an aperture a little larger than the corn, and apply with sticking-plaster, filling the aperture with absorbent cotton saturated in spirits of camphor or lemon juice. Easy stockings and shoes in such a case are imperative.

## Chapter Four

## VASCULAR CORNS

Of Rare Occurrence—Found on the Sole and Heel of the Foot—Meaning of Name—General Appearance—Best Way to Treat.

HE vascular corn, which is exceedingly painful, is fortunately rather rare. As the name, which is of Latin derivation implies, this growth is filled with minute blood-vessels, which make the danger of hemorrhage greater than in other varieties of corns. These corns invariably appear on the plantar surface, or sole of the foot, and usually on that portion of the sole known as the "ball" of the foot. They closely resemble a wart in appearance and like a wart, they extend to a considerable distance below the surface. They do not extend far above the skin. When fully developed, they are spongy, studded with minute red and black spots, and are surrounded by an area of inflammation. Frequently the entire foot is markedly swollen by the extension of this inflamed area.



Soft corns between the toes, not visible ; vascular  
corns on top of toes.



The best way to treat a vascular corn is to bathe the foot in very warm water for ten or fifteen minutes; add a tablespoonful of borax or ammonia, in order to allay the irritation, and dry thoroughly. Then remove the surface of the corn with a small piece of emery paper or knife, but be very cautious not to cause the rupture of any of the little veins, as that would cause them to bleed, and the treatment could not be proceeded with until the hemorrhage had ceased. To stop the flow, touch with Lunar caustic.

When little red spots are plainly visible, apply to these specks or points caustic, or nitric acid with the end of a wooden toothpick, which must be whittled to a point in order not to get the acid on any except the part affected. Avoid using the foot as much as possible, and be sure that the inside sole of the shoe is perfectly smooth, and that the stocking has no prominent darns, knots, or seams to cause irritation and a return of the trouble. A buckskin or chamois sole should be worn inside of the shoes, until the corn has entirely disappeared.

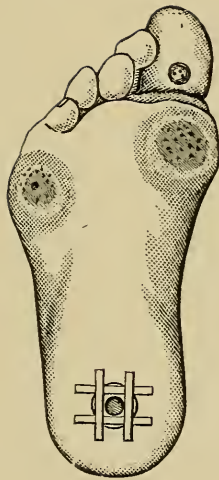
The caustic or acid application can be repeated each day, or every other day, as may prove necessary, until the corn is cured.

You will see in cut how to dress and protect the

said corn. The pad should be worn and renewed every other day until the corn has entirely disappeared.

If the vascular corn does not yield under this treatment consult a surgeon-chiropodist or your family physician.





Vascular corns on sole and heel of foot showing method of padding.



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Ingrown toe-nail, with proud flesh.



## Chapter Five

## THE TOE-NAILS

Their Use—Distortions—Suggestions for Cutting the Toe-Nails—Ingrowing Nails—Wrong Treatment, and its Results—Way to Cure Ingrowing Nails—The Ancient Method—The Club Nail—Its Cause—The Hammer Toe—Its Care.

**I**N this age of hurry, bustle, and money-getting, there is no part of the human body which receives so little attention as the toe-nail, and but very few persons appear even to know its use.

The nails are placed over the ends of both fingers and toes to protect the nerves, which lie very near the surface of the skin, and which would otherwise prove extremely sensitive.

Accident, as well as inattention and ignorance, cause the toe-nail to grow in various shapes, and as the shoe tends to aggravate this; and further injure the nail, there are very few persons who have absolutely perfect toe-nails. Badly shaped nails cause pain and annoyance, and if not speedily

and properly attended to, end in that most common complaint, "ingrowing toe-nails."

For the benefit of those who desire to improve a misshapen nail, no matter to what cause it may be due, I make the few following suggestions.

The manner in which the toe-nails are cut is of the greatest importance. The feet should first be bathed for a short time in salt water, and while they are still in the water scrubbed well with a stiff brush, especially the cuticle around the base of the nails. This will tend to remove any ragged cuticle and chalky white substance, which, being thrown off by the pores of the skin, gathers under the nails. Dry the feet thoroughly, especially between the toes.

When the nails are flat trim them straight across, even with the ends of the toes, with a pair of oval scissors; but when oval trim them rather rounded on the ends, but not pointed.

Should the nail have a tendency to turn down and into the flesh at the sides, insert a little wad of sponge or lint under it, to raise the nail, thus preventing it from irritating the flesh, and thus developing an ingrowing toe-nail, which when once developed will cause more pain and suffering than comes from any other trouble connected with the foot.

The toe-nails are liable to assume this shape, but it is most frequently found in the nails of the great toes. This is usually due to the wearing of shoes which are too short and narrow, and by the fact that at the first sensation of pain the person so afflicted immediately has recourse to the scissors and cuts the nail off short, under the impression that the pain is caused by the length of the nail. But this will serve to give only temporary relief, and as the pressure from the shoe is not removed, the flesh is pushed still farther up over the rough edge of the nail, causing greater pain than before. Again the scissors are called into play, but this time at the side of the nail, which is cut again and again, until the scissors will no longer reach the part of the nail which is supposed to cause the suffering.

The result of this cutting is a rough, jagged edge on the under side of the nail, and as the shoe is still crowding the already sore flesh over the edge, the patient now suffers most intense pain. This continued irritation increases the inflammation, until the flesh swells up, often covering half the nail, pus forms, and proud flesh is produced.

The pain will then be so severe that the shoe cannot be worn, nor the weight of the body borne on the foot, in walking or standing: the patient

is now compelled to cease his or her employment, rest the foot, and call the physician or surgeon to his aid.

The first thing to do in attempting to cure an ingrowing toe-nail is to find just how far the nail has grown down into the flesh at the side, by pushing away the thick, crowded flesh—provided there is not too much inflammation.

Should this prove too painful, or the surrounding flesh be much swollen, a poultice of ground slippery-elm or flaxseed must be applied before retiring, and kept on all night. In the morning remove the poultice, bathe the foot for ten or fifteen minutes in water as hot as can be borne, add ten drops of carbolic acid, sponging the toe thoroughly to remove any foreign substance, and then gently but perfectly dry the foot. The flesh will then be found in a very soft condition, and the inflammation so far subsided as to admit of pushing the flesh back from the nail with a dull instrument, and making an examination into the cause of the trouble.

Should there be any sharp or rough edges, a point, or even a fragment of projecting nail, these must be removed with a knife or scissors, after which sponge with listerine. The edges of the nail must then be raised sufficiently to allow the



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Deformed toes and Callosities on the sole of foot.



insertion, between that and the sore flesh underneath, of a small, flat piece of lint, applying at the same time a little zinc ointment or other healing salve, after which the toe should be bound up with a piece of old linen.

This treatment must be faithfully and exactly repeated, night and morning, until the cure is complete; and the patient must wear a shoe from which the leather over the toe has been removed. This is the only way to prevent pressure upon the sore spot; and if it is subjected to any pressure, proud flesh is liable to appear. A wad of cotton batting or sponge should be placed between the great toe and the second, to keep them from pressing together, thus aiding the healing process.

Should proud flesh set in, add to the bath for the foot a little carbolic acid, in the proportion of half a teaspoonful to a pint of water, and wash carefully the parts affected, drying the foot well; after which sprinkle a little burnt alum on the proud flesh. This is entirely painless, and will consume all the proud flesh in the course of a few days.

As this trouble is usually caused by wearing shoes that are too short, too flat, or too narrow, it will surely return unless proper shoes are at once procured and worn.

There is still another method of treating this disease, but happily it is only used occasionally by certain physicians and surgeons, though formerly it was the only method known which would effect a cure.

The half or whole nail causing the trouble was entirely removed, after putting the patient under the influence of chloroform or ether, by pulling it entirely out from the flesh with a pair of forceps. This torture and its consequences confined the patient to the house for a number of weeks, or until the inflammation had subsided. Even this, in a great many instances, did not serve to prevent a return of the trouble, as after the cure had been effected at such an immense sacrifice, the victims, through either ignorance or carelessness, returned to their old habits of wearing ill-fitting shoes.

My advice to all persons afflicted with ingrowing toe-nails, or who have had them treated but without succeeding in effecting a cure, is to procure at once shoes of sufficient length, breadth, and fullness of upper to allow plenty of room for the toes, and especially for the great toe, and follow the treatment heretofore described carefully. If this advice is acted upon a cure will certainly follow in a reasonable length of time.

## THE CLUB NAIL.

The Club Nail is usually caused by accident, or the pressure of a shoe which is too short, or not full enough in the upper. The nails grow very thick and brittle, sometimes becoming as hard as bone, and enlarging to an unnatural height and length. While they are anything but beautiful, it is seldom that they are painful, until they grow high enough to cause the shoe to press the nail into the delicate nerves underneath; then they are a source of constant misery until cared for properly.

On account of the great thickness and hardness of the club nail, the easiest and best way to prevent its becoming a source of annoyance is to use a pair of regular nail clippers, or a fine rasp, first soaking the foot in hot water for ten or fifteen minutes. After drying, apply to the nail to be cut some spirits of ammonia diluted, as this will serve to soften the nail and permit of easy manipulation. After this preparation the next step is to clip off the excess of nail, in as small pieces as possible, in order to avoid injuring the base of the nail, or the matrix. Should the rasp be used instead of the clippers, file the nail as gently as possible. When the operation is completed,

anoint the whole toe with carbolated vaseline or any healing salve.

### HAMMER TOE.

Hammer toe is a deformity usually observed in the second toe. This member is acutely flexed at its second joint, so that when the foot is planted on the ground in walking, the tip of the toe rests on the surface. The second joint is prominent and frequently projects upward above the rest of the toes. This prominence is pressed upon by the shoe and a hard corn is produced.

This deformity is produced by a shortening of the tendons that run along the under surface of the toe (the flexor tendons) and a corresponding elongation of the extensor tendons.

The treatment consists of massage and forcible straightening of the part every day, combined with the wearing of a splint between the periods of treatment. To be effectual, this treatment must be skillfully performed and faithfully carried out. If it is unsuccessful after a reasonable period of trial, your physician or a specialist should be consulted.

If a hard corn is present, it should be treated in accordance with the methods outlined in chapter two.

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Hammer toe with corn on joint.





## Chapter Six

BUNIONS, DISLOCATED AND  
ENLARGED JOINTS

All Three Popularly Called Bunions—Cause of Bunions—Relief—Useless to Treat unless Proper Shoes are Worn—Enlarged Joints Explained—Their Treatment—Dislocated Joints—Their Care.



ANY enlargement of the flesh covering the joints at the base of the great and little toes is popularly termed a bunion; but this is a great mistake, as there are three distinct diseases of these joints, almost precisely similar in appearance, and due to exactly the same cause or causes, but which require three different forms of treatment. A person may have one, two, or even three of these diseases at the same time and in the same joint, but the appearance would be similar to a bunion.

These diseases are bunions, dislocated joints, and enlarged joints, and all are primarily due to the wearing of ill-fitting shoes, rheumatic gout, or accidental injury.

A bunion is an inflammation of the bursa situated over the metatarso-phalangeal joint of the great toe or the fifth toe. This bursa is a little subcutaneous sac containing just enough glairy fluid to lubricate its walls, and is for the protection of the bone and joint. Constant pressure causes inflammation of the bursa or bursitis with the attendant symptoms of redness, swelling, pain and heat.

The pain and swelling in a true bunion appears at intervals of from two to four days or longer, and persists for a variable period. Each recurring attack is usually worse than the preceding ones. As the bunion enlarges, the pressure and irritation on its surface increase, and small, hard corns are produced, as described in Chapter II. If troublesome, these should be treated as described in that chapter. The bunion frequently resists all attempts to cure it until abscess formation takes place, when the healing of the abscess obliterates the sac and thus removes the chief causative factor of the disease.

The bunion proper is caused locally by the swelling of the flesh covering the joint at the base of the great or little toes. I have seen some cases where both joints were affected on the same foot. The constant pressure of the shoe when walking,

1010/1  
1010/2  
1010/3



Large bunion with distorted toe.



if either too short, too narrow, or too loose in the instep, so as to cause the toes to press forward into the tip of the shoe, causes pain as well as swelling, and the part affected becomes red and inflamed. This pain, as well as the inflamed appearance, comes and goes at intervals of from two to four days' duration, and sometimes even longer; but each time, as the pain returns, it becomes more severe, and the swelling increases; the pores on its surface begin to close, and a hard, thick skin, studded with little hard corns about the size of a pin-head or larger, covers the bunion. These little points or grains of hard substance press down into the skin and against the nerves underneath, and cause exquisite pain.

The dislocated joint can be cured, the enlarged joint greatly reduced, but the bunion proper can be only relieved of pain from time to time by proper treatment or an operation by a skillful surgeon.

In order to obtain this relief, soak the foot in a bath of hot water, keeping the temperature up by adding boiling water from time to time, from fifteen to thirty minutes, in order to draw out as much inflammation as possible. Dry the foot thoroughly, and if there be any callosities, or small hard corns, remove them with the point of a

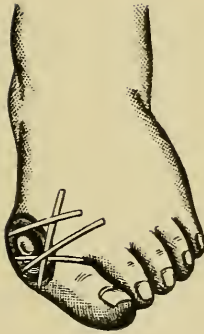
knife, but do not cause the part to bleed, or even irritate it much. If, after the above treatment, the surface of the swelling is rough, reduce it by the judicious use of a piece of fine emery paper or a fine file.

Then rub well into the joint with the palm of the hand, for about ten minutes, Dr. Kahler's salve, and spread some of it on a piece of old linen and apply it to the bunion. Bandage the foot with a strip of old linen, and draw over it a thin white sock or stocking. Should it be desirable or necessary to wear a shoe, an old one must be procured and substituted for the regular footwear, and all that part which would be liable to press on the seat of the trouble must be cut away. It would be well, however, to rest the foot as much as possible for the first few days. A washer of buckskin or chamois, good thickness, with an aperture a little larger than the bunion, will aid in keeping pressure from the sore spot.

This treatment must be repeated night and morning until the pain and redness have entirely disappeared.

Should the bunion be much swollen and painful to the touch, and present symptoms of ulceration under the skin, use hot compresses of witch hazel or water during the day and before retiring

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Method of dressing bunions and inflamed joints.





for the night. In the morning bathe the foot in water as hot as can be borne; any callosities or little corns can then be easily removed with the point of a knife. After this has been done, apply carbolated salve, or camphorated ice, on a piece of old linen, bandaging the foot as heretofore described.

Should the inflammation in the joints affected refuse to yield to this treatment, the family physician should be called, as the trouble is probably due to some other cause.

As the bunion is usually caused by an ill-fitting shoe or stockings, and as a return to the use of such shoes after the bunion has been relieved will be sure to bring back the trouble, it will be useless to continue this treatment unless the patient's mind is made up to wear shoes for comfort, having room for five toes instead of for only two, as is the fashion at present, and which are long enough to prevent pressure on the end of the great toe.

During the treatment of thousands of cases of this description, in seventy-five out of every hundred the cause could be traced directly to the shoe or boot. They were either too short, flat and narrow, or too loose in the instep and heel. After treatment, I recommended shoes of a proper size

at once, and in cases where my advice was followed the parties experienced permanent relief, and on continued wearing of these shoes the size of the bunion has been greatly diminished.

### ENLARGED JOINTS.

Enlarged Joints are due to the same general causes as the bunion, but are entirely different in nature. The same treatment can be applied to both.

Sufferers from rheumatism or rheumatic gout are particularly liable to attacks of this nature; and once the disease is established in the joints of the feet, it can never be entirely eradicated, but the pain can be relieved and the size of the joints somewhat reduced by bathing the foot thoroughly in water as hot as can be borne, as this will reduce the inflammation, besides softening the chalky matter deposited in the joints.

Elderly persons, and those in delicate health, should, of course, consult their medical attendants before subjecting themselves to any treatment which would be liable to cause them to catch cold. But healthy persons would not be affected by this treatment, other than to attain the object desired without injury.



Enlarged and dislocated joint.



After drying the foot carefully, rub into the joint with the palm of the hand Dr. Kahler's salve or vaseline, or anything which will serve to lubricate the joint and produce a reaction. Massage and work the joint with the fingers occasionally.

Paint the affected joint once every week with tincture of iodine, but do not use this if there is any break in the skin. The foot, in the meantime, must have plenty of room in the stocking and shoe, as any pressure whatever will certainly cause pain, and tend to increase the size of the joint.

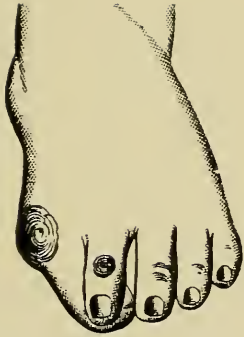
Sub-luxated or partially dislocated joints occur principally in the great toe at its junction with the first metatarsal bone. This deformity is caused by the pressure of the shoes—particularly those with short and pointed toes—deflecting the toe from its natural position inward. The toe is kept in this position and ultimately the ligament on the outer side of the joint is permanently elongated by the constant pulling to which it is subjected, and the bones are no longer maintained in their normal relations. When the great toe is thus affected and is permanently adducted and displaced toward the median line, the condition is known as *hallux valgus*. The pressure on the head of the metatarsal bone causes it to enlarge,

and in some cases the enlargement is very marked. When this has taken place, a cure cannot be effected except by surgical procedure. Otherwise a cure may be expected if the treatment outlined below is faithfully carried out. In the ordinary uncomplicated partial dislocation of the joint, great improvement and in many cases a cure can be looked for if shoes of sufficient length and breadth are worn, and the sub-luxated joint is treated by a skilled surgeon-chiroprapist. The shoe must be broad enough to allow the toes to lie parallel to each other, and not crowded together in an unsightly, painful mass.

### DISLOCATED JOINTS.

Dislocated Joints are of very common occurrence, and are often mistaken for and treated as bunions. They are caused primarily by the present fashionable shape of shoe, which is narrow and pointed, with very high heels. The foot being crowded into the toe of the shoe by the weight of the body, and the toe being narrow and pointed, the middle toes of the foot are crushed together, and the joint of the great toe, and often of the little toe, forced out of its socket.

Unlike the bunion or enlarged joint, this trouble



Corns on the bunion and on the joint of the toe.





can be cured by proper treatment, but it is necessary to state here, that unless it is taken up at once and the cause removed, it will become chronic and incurable. In this stage of the injury, the joint discharges its lubricating fluid through a wound which it opens for itself by suppuration, and finally becomes stiff. Then the surgeon must be called in for relief.

So delicate and sensitive is the much-abused foot, that even short and badly shaped stockings have been known to throw the joints out of place.

Whenever, by any of the above described causes, a joint is enlarged, the liability to the formation of a bunion is increased very greatly, and must be very carefully guarded against by the use of proper foot-wear. Errors are frequently made in the diagnosis of the condition present, and treatment for one condition is carried out when another difficulty is present. Treating the enlarged head of a metatarsal bone as a bunion will yield only barren results, and the patient will be dissatisfied. First be sure the diagnosis is correct and then pursue the treatment.

To cure a dislocated joint, first draw out the local inflammation by means of a folded linen handkerchief, soaked thoroughly with hot water or witch hazel, placed over the swelling. If hot

water is used, the handkerchief must be kept wet continually with water as hot as can be borne, for two or three hours. If witch hazel is used it would be well to heat it.

Dry the foot thoroughly, and rub the joint briskly with linseed oil, or vaseline, to lubricate it; and at the same time, take a firm hold of the end of the toe affected, and work the joint up and down. Pull it straight, and the dislocated joint will then easily work back into its socket. This must be repeated every day until all soreness disappears.

In the meantime the foot must be properly bandaged with old linen, or a regular surgeon's bandage, during the day, but the bandage can be removed at night. When bandaged it must be done in such a way as to keep the toe straight, so that the joint will remain properly in its socket, until the ligaments, or bands, become strong enough to hold it in its place unaided. It is imperative that a long and roomy shoe should be worn, fitting well through instep and heel.

Should, however, there be any discharge or suppuration from the joint, it will be necessary to give the foot entire rest, as walking will increase the inflammation.

The wound should be carefully washed with



Showing a foot having bunion, enlarged and dislocated joint at the same time.



warm water, adding a few drops of a solution of carbolic acid, or any other antiseptic, morning and night, and the joint bandaged as heretofore described.

## Chapter Seven

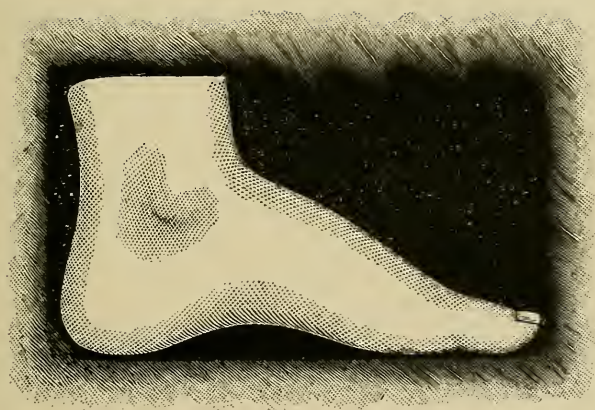
## FLAT FEET

How Caused—Frequency of Occurrences—Shoes That Cause this Trouble—Prevention—Relief—Wear Arch Supporters.



THE flat-foot, or “splaw” foot, as it is sometimes called, is common in both sexes and at all ages. It is not common in very young children, because they have not learned to walk. The most important causative factor in the production of flat-foot is the excessive and prolonged use of the feet in standing or walking. It is more common in heavy persons, and in those who are in a weakened general condition. Fleshy people, therefore, on account of their weight, and the poorer classes, on account of deficient nutrition, are most frequently affected. After exhausting diseases with their enforced sojourn in bed, the ligaments of the plantar arch are weak and relaxed from disuse and are prone to give way during convalescence if

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Showing the foot with a perfect arch



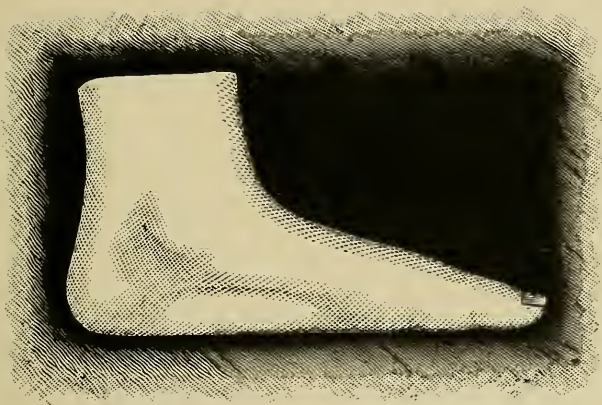


walking is indulged in too much, particularly if slippers or low shoes, which afford no support to the feet, are worn. Children who are taught to walk too early in life, often develop flat-foot, together with weak ankles and bow-legs.

The ligaments and structures which support the arch of the foot and furnish its elasticity, become relaxed and inelastic, and the arch gives way as a bow straightens out when the bow-string is cut. The springiness of the normal foot is lost, and walking or standing causes severe pain, as well as that tired feeling. If treatment is not instituted in time, the parts seldom regain their normal tone and the result will be an incurable flat-foot, with the ungraceful shuffling gait peculiar to this deformity. A foot so afflicted is generally turned outward to a marked degree, and in walking the outside of the foot is planted on the ground first, rather than the heel.

During its onset, in fact until all the parts are thoroughly accustomed to their abnormal position, the pain occasioned by this trouble is severe. The patient generally thinks he has rheumatism in his ankles and not infrequently takes patent medicines in unlimited quantities to cure his supposed rheumatism. Standing causes severe pain, and walking becomes a laborious effort. Upon ex-

amination at this stage, no redness or swelling is discovered and to the untrained eye no deformity is visible. Later in the disease the normal convex surface of the instep is noticeably flattened, and the contour of the plantar surface or sole of the foot is much changed. The changes in the plantar surface may be well seen by wetting the sole of the foot, stepping on a plane surface and observing the resulting impression. A normal foot leaves a round impression where the heel rested; an oblong or kidney shaped one representing the ball of the foot and five small ones for the toes; while a flat-foot leaves one large imprint representing the entire plantar surface. Flat feet in both sexes are becoming more and more common. In children it is comparatively easy to cure flat-foot unless the deformity is very marked, and in adults, beneficial results may be obtained by recognizing the condition early and promptly resorting to scientific treatment. The ordinary shoe, particularly shoes with high heels and poorly made, not only tend to cause flat-foot, but when it is once started are powerful factors in aggravating the condition. The flat-foot placed in the ordinary shoe of indifferent fit will develop corns and bunions in the most surprisingly prolific manner, thus adding to the discomfort of the suffering patient.



Showing the arch of the foot when broken down.



When taken in time, flat feet can be prevented, especially with children; but it must be fully understood that once the arch of the foot has entirely broken down, it is rarely if ever built up again.

A properly shaped shoe, well fitting, is really the only medicine for this complaint; and when it first makes its appearance in the little feet of children, spring-heeled shoes, with extra stiff shanks and broad soles, must be substituted for those worn previously, without delay; but they must fit well in the heel and over the instep, in order properly to support the arch of the foot. This is a prevention and a remedy.

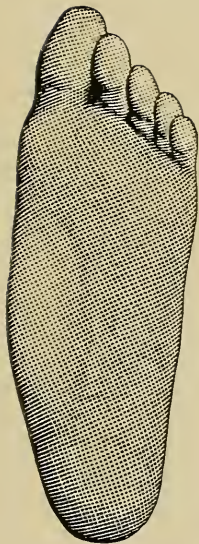
Treatment for those who are unfortunate enough to be afflicted with flat feet should be measured by a careful and practical shoemaker, and should have their shoes made with broad soles, broad shanks (almost as broad as the soles, and very stiff) and with long, broad heels, about half an inch high. They must, of course, be laced, and should fit firmly in the heel and over the instep, with plenty of room for the ball of the foot and the toes, and extra long.

It would be advisable to procure two pairs of shoes, and wear them alternately each day, as this relieves the feet, and ventilates the shoes, besides being really more economical than wearing one

pair steadily until worn out, and then procuring another pair to be used in the same manner.

Arch supporters placed inside the shoe are excellent when properly made.

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View of the flat foot from the sole.





## Chapter Eight

RHEUMATICS, GOUT, SPRAINS AND  
CHILBLAINS

Origin of Gout—Relief for the Pain—Cause and Symptoms of Sprain—Treatment to be Used—Chilblains—Their Cause—General Treatment and Cure.

**R**HEUMATISM and gout, but particularly the former, attack all the joints, and when the joints of the toes are affected painful results follow.

Rheumatism likewise produces large joints. It is a systemic disease and, like gout, must be methodically treated by a physician if a cure is to be effected. The rheumatic joint condition does not exhibit tophi, is less painful than the gouty manifestation, and is not so frequently confined to the great toe.

Gout originates in the blood, and generally manifests itself in the feet. The great toe, as a rule, is first affected; though the heel and ball of

the foot sometimes has the swelling and pain, which gradually extends to the whole foot. This disease usually attacks those past middle life, although instances are on record of cases in quite young persons; but these are usually combined with rheumatism.

The exact cause of gout is in dispute, and it would require a thorough knowledge of anatomy and hygiene to understand the different theories; so I will not burden the reader with details, as gout cannot be treated successfully except by a regular physician or a specialist.

The pain attending the disease, however, can be greatly relieved by the wearing of shoes which have been properly made, with abundance of room to allow for the unnatural swelling of the feet, and with thick soles, but with very soft and pliable uppers, made of either fine kid or buckskin.

Those afflicted with these troubles will save themselves much misery and pain by having two pairs of shoes always on hand, one of which can be worn when the feet are not swollen, and the other of a larger size to be worn when the feet are puffed up and very painful. A good but temporary relief from the severe pain is a foot-bath of hot Pond's Extract or witch hazel. An excellent remedy is to slip a thick woolen sock over

the foot, then bandage with oil silk. This treatment will give great relief. Repeat as often as necessary.

### RHEUMATIC GOUT.

Rheumatic gout, which always deposits a chalky substance in the joints of both fingers and toes, can do this much more readily when the shoe has already produced irritation; and deposits such a quantity as greatly to increase the thickness of the joint, until it looks very much like an aggravated bunion. Hence such a swelling is often mistaken for and treated as a bunion.

### SPRAINS.

A sprain is caused by violent stretching or wrenching of the tendons and ligaments controlling the various movements of the foot; and in particularly severe cases some of the smaller blood-vessels are ruptured.

After an accident of this kind the foot or ankle rapidly swells, and this is accompanied by severe heat and pain, with a sensation of violent throbbing. The slightest movement, or the weight of the body thrown upon the foot, as in walking or standing, causes excruciating agony, and often occasions nausea and even fainting spells.

When any of the ligaments or tendons are broken, or any of the small blood-vessels ruptured, the skin over the sprain becomes black and blue, or mottled in appearance.

If not skillfully treated immediately after the accident, particularly when the patient is past middle age, the sprain becomes more serious than even a dislocation or a fracture. The first important thing is to prevent inflammation, which may be done by placing the foot in a horizontal position, and applying over the sprain a folded cloth, kept soaked with water as hot as can be borne.

If hot water cannot be had, bathe the foot in cold water, as even this will serve to keep down the swelling until a physician can be summoned.

### CHILBLAINS.

Several different forms of disease of the same general character have been commonly known under the name of chilblains; but I will not give their details or their peculiar symptoms, but will describe and prescribe a treatment for ordinary chilblains only.

When any part of the foot has been exposed for a considerable length of time to continued cold, which is not quite sufficient to cause the blood to

congeal, and is then injudiciously exposed to heat, chilblains will be the result.

The sensation, at first, is of itching and burning, which is followed by a continued aching. On examination the parts appear red and somewhat swollen; if it is a severe case, the swelling is great and the inflamed parts very sensitive.

Children are more liable to this trouble than older persons. They are prone to run to the fire the minute their feet become cold, and often loiter on their way to and from school to play in the snow; and a good soaking in slushy water, and one session in a warm school-room, will produce a severe case of chilblains sooner than any other form of exposure. Adults often contract a severe form of this trouble by standing over a hot register after having ridden for some time in a cold car or carriage.

As there are so many forms of this trouble, it will be impossible to suggest other than the general principles of treatment, which must be modified for each individual case. A good rule is to make use of a cold substance, without the application of heat, to revive a proper circulation in the parts affected. Hence, the shoes and stockings must be removed in a cold room, without delay, and the feet rubbed briskly with snow or cold

water and the palm of the hand, until the skin resumes its natural glow and healthy appearance.

Should the trouble be of long standing, or prove unyielding to this treatment, follow the above directions, and, after drying, anoint the parts with a mild liniment. (Found in Chapter XI.) Wash the feet affected with ichthyol soap, 5 per cent., morning and evening. After the bath use hydrochloric acid diluted 10 per cent., by sponging the parts affected.

I would advise all persons who are troubled with chilblains to wear good roomy shoes, to allow for swelling, as pressure will greatly aggravate the difficulty, and will make absolute cure impossible.

## Chapter Nine

DISEASES OF THE PERSPIRATION,  
AND COLD FEET

Fetid Odors—A Sure Cure—Cracking of Skin between the Toes—Treatment—Lack of Perspiration—Relief—Cold Feet—Aids to Defective Circulation.




WHEN feet throw off a bad odor, it is due to a chronic excess of perspiration, which scalds the skin, and finally causes the pores to become diseased. This is not due to any lack of cleanliness, as some suppose, but to a weak condition of the skin of the feet, aggravated by being constantly covered with leather shoes, lacking proper ventilation. Inattention to this disease will permit it to become very disagreeable to any one compelled to remain in the same room with the person afflicted; hence it is the cause of much mortification to its victims.

As the means of getting rid of this trouble are very simple and inexpensive, ignorance is the only possible excuse for any one who permits the odor

from his feet to annoy himself or his neighbors. I give the treatment which has yet to fail, during many years of practice.

Bathe the feet in warm or cold water, whichever you are accustomed to use, for about ten minutes, morning and evening, adding to the water, in which no soap or soap powder can be used, sulphuric acid, in the proportion of one teaspoonful to a quart of water before placing the feet in the bath. The mixture will be milky in appearance.

 [Be very careful in handling sulphuric acid; the common name for it is "vitriol," and it will burn anything with which it comes in contact, be it clothing or flesh, just as badly as though it were red-hot iron. Keep beyond the reach of children. In the foot-bath given, however, the quantity is very small, and its dangerous power is neutralized by the large quantity of water.]

This bath should be continued as directed every day for one week. Should the trouble return, repeat the treatment for another week, when the cure should be complete. Should this treatment fail in accomplishing the desired effect, the physician should be consulted, as the disease is probably complicated with some general disorder of the blood.



Perspiration will often cause the cracking or splitting of the skin between the toes. This is exceedingly painful, as the cracks often extend all the way around the base of the toe, underneath. The cause is an acid state of the perspiration, or the continued neglect of the ordinary foot-bath.

Castile soap and warm water, followed by thorough drying, will often work wonders; but should much moisture appear between the toes, after drying, dust carefully with a little French chalk, starch, or talcum powder, first applying a small quantity of tincture of myrrh to the most severe cracks.

The lack of perspiration will cause a dry and burning sensation in the feet, and is due to a disturbance of the general health, not to any local disorder. Dyspepsia and kindred ailments, as well as rheumatism and gout, will almost invariably cause this condition of the feet.

To relieve it, a foot-bath of tepid water, into which a tablespoonful of powdered borax can be used morning and evening with excellent effect, especially after a walk. Bicarbonate of potash dissolved in a foot-bath has also been found very beneficial.

Persons who are troubled with cold feet should bathe them in cold water for about five minutes on

arising in the morning, and rub them briskly with a rough towel until the skin shows a bright healthy glow. This keeps the circulation in perfect order, and can be repeated in the evening with marked benefit.

During the day two pairs of stockings should be worn. The pair worn next the skin must be thin and white, but the outside pair can be cotton, woolen or silk of any color. The white need come only as far as the ankle. Felt or chamois should be worn inside the shoe, where possible, as this will serve to absorb the dampness, and keep the cold from striking into the feet.

Cold and "clammy" feet are indicative of general debility, and but little benefit can be derived from external applications or treatment. But spirits of camphor, or bay rum, mixed with half its quantity of glycerine, will prove of benefit as an aid to establish a good circulation. Rub the feet thoroughly after each application, and follow the foregoing instructions regarding stockings carefully.

The shoes should of course be of good width and length, and have heavy soles.

The cause of this clammy condition of the feet should be ascertained and treated by a physician. Our suggestions are designed simply to mitigate its effects.

## Chapter Ten

HOW TO BATHE AND DRESS THE  
FEET

Should be Bathed in the Evening and Morning—In Salt Water—Prescription for Brine—Hot or Cold Foot-Bath—Foot-Gear for Children—Stockings—Shoes—Effect of Foot-Clothing on Health—Bound Feet of Chinese Women—The Proper Shoe.



THE evening, before retiring, is without doubt the time to bathe the feet, which have been in motion all day during the hours of business, and exposed to all sorts of weather, and are consequently much fatigued. The bath will remove all aches and tired feelings, and the sleep will be sweet and refreshing.

As not everyone understands how to bathe the feet so as to obtain the best results, I give a few instructions, which, if followed carefully, will not fail to relieve even the sorest feet, where the soreness is due to fatigue.

Add to the water for the foot-bath—which should be warm—brine in the proportion of one cupful to a quart of water, and soak the feet in this for about ten or fifteen minutes, scrubbing them well with a stiff nail-brush all over. This will remove any dead cuticle, and cleanse the pores of the skin thoroughly. It also keeps the skin in a vigorous and healthy condition, and often prevents the formation of callous spots and even corns, and is especially beneficial to the feet of children. Any callosities on the soles or heels should be reduced with a piece of fine emery paper, or a fine file, before placing the feet in the water.

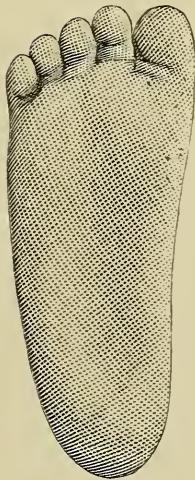
As considerable time can be saved by keeping the brine for this bath on hand, it will be well to have the recipe. The best is made in this way: Dissolve one pint of sea-salt in two quarts of water, pour it into a covered jar or bottle, and allow it to stand for twenty-four hours before using. Some of the salt will not dissolve, and when some of the brine has been used, the bottle may be filled with clear water, repeating this process until all the salt is gone from the bottom of the vessel, when a new supply must be made.

The advisability of using the foot-bath hot or cold must depend entirely on the previous habits



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A perfect baby's foot.



A well-shaped child's foot.



and constitution of the individual. Cold water will be too much of a shock to some; too much hot water is weakening; therefore tepid water is preferable for the use of persons advanced in years, or in delicate health. Those who are subject to gout, rheumatism and kindred ailments, when actually suffering from any of these maladies, should sponge their feet, as any sudden change in temperature will often produce serious results.

Persons past middle life will run no risks, if, instead of bathing their feet, they will sponge them off with tepid water, drying them thoroughly, especially between the toes.

Too little attention is paid by mothers to the kind of shoes or stockings put upon the growing feet of their children. During the process of development it is very important that the minor details should be carefully looked after, as many of the corns, bunions, and ingrowing toe-nails with which the people of this generation suffer are due to the careless treatment of their feet during childhood.

Stockings with as few seams as possible, and with plenty of room for all the toes, should be provided for children; as seams cause corns, and a stocking that is too short is just as bad as a shoe

with the same fault, and much misery and annoyance will surely result in after years from their continued use.

Colored stockings are a source of danger to those who have thin or sensitive skin, and should not be worn when the feet are inflamed or the skin broken, or when they have been frost-bitten. Stockings with white feet to the instep are just as good as those that are entirely white.

There are stockings manufactured to-day with a right and a left to the pair. I most heartily recommend them to all my readers and patients, as they are certainly the stockings to wear.

The subject of children's shoes cannot be treated too carefully, for parents who will incur any expense and take the utmost pains to give their children comfort, often overlook through ignorance or carelessness the needs of the tender and growing feet, and buy shoes which are not only too short and narrow, but ill-fitting in every part.

We need shoes for precisely the same reason that we wear clothes on other parts of our bodies; namely, that we may be protected from injurious external influences. The influences from which we desire to be protected are, roughness of the ground, and cold and wet. When the roughness



of the ground only is to be provided against, the sandal consisting of a sole of stiff leather or wood, fastened by thongs or bands so as completely to cover the under part of the foot is sufficient.

But if protection from cold and wet be also desired, the sole has generally added to it a covering for the whole foot and ankle. This covering may be made of various materials, but usually consists of soft leather. When thus combined with the sole, the upper leather further serves to keep the sole firmly fixed under the foot, and thus does away with the need of bands and thongs; such combinations of upper leather and sole are called boots, shoes or foot-wear.

A covering for the foot has, however, to fulfill this object in a manner that will give rise to no disadvantage, the existence of which would essentially diminish the benefits of protection. The remedy might, in this case, be worse than the evil. Here, however, fashion, so unfortunately involved in all our clothing relations, steps in and must even have her say on the shape of the shoe. So long as her influence is confined to the cut and amplitude of the coat, the form, and of the hat, and the like, the only harm that occurs is the possible production of a somewhat ludicrous effect.

It signifies little, so far as health is concerned,

whether a man wears a gray or a brown coat, but it is of much importance whether the shoe he wears be broad or narrow, rounded or pointed, long or short.

The shape of the shoe has too much an effect on health and comfort to be left to the dictates of fashion.

The influence of fashion on the shape of the shoe produces the most baneful effect on the mechanism of the foot and on its soundness, thus materially affecting motion, and our consequent ability to take a sufficient amount of open air exercise.

It is quite clear that the foot must enter the shoe, and if the shoe differs in shape from the foot, it is no less plain that the foot, being the more pliable, must necessarily adapt itself to the shape of the shoe. If then, fashion prescribes an arbitrary form of shoe, she goes far beyond her province, and in reality arrogates to herself the right of determining the shape of the foot, but the foot is a part of the body and should not be changed by fashion; for the body is a gift, and its several parts are beautifully adapted for the purposes for which they were intended.

We do not, indeed, at first sight, fully perceive the arrogant absurdity of which fashion is guilty

in going so far as to determine the shape of our feet, because we are not alive to the fact that the case is peculiar to the feet. We only see it influencing the shape of the shoe, and come to the conclusion that it may regulate this as well as the cut of the coat.

To this prevalent opinion we yield, regardless of the influence on the shape of the shoe, and thereby on the foot. As well, indeed, might fashion one day come to the conclusion that fingers are inelegant, and decree that henceforth the hand be squeezed into a conical leather bag; as well, indeed might she in one of her freaks forbid the display of our arms and bind them firmly to our bodies like those of children in swaddling clothes.

The shoe should protect the foot, but it has no business to distort its shape.

A shoe which will really be a help to walking and not, as is too often the case, a hindrance, should conform to the shape of the foot, and thus must accordingly first occupy our attention.

Since the feet of a child are actually in process of development, the bones and ligaments are soft and pliable, and will conform to a bad as well as to a properly shaped shoe. Hence it is far better to buy shoes of sufficient length and breadth, with snug heels and close-fitting instep,

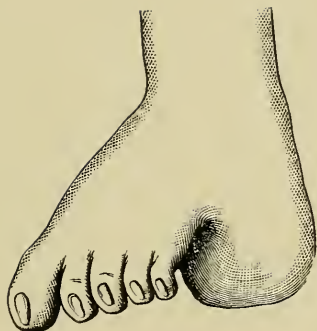
which alone can make it possible for the child to grow up with perfect feet. Harsh, but just, was the remark of a young girl to her mother: "You made me wear such narrow and short shoes that I shall have sore feet all my life."

The feet of a child can be compared to a young tree, which can be made to grow straight or crooked. Which it shall be is decided by the parents. It is most important that the feet should be retained in the form in which they were created.

That the fit of the clothing for the feet has a great influence on the general health is apparent; and when, as is usually the case, the foot-clothing does not conform to the size and natural shape of the feet, those members, being more pliable than the shoes, to conform to the mold into which they are forced; and, the joints being thrust out of place, friction and pressure cause inflammation, and all sorts of diseases of the feet are the inevitable result.

An example of the extreme pliability of the feet is seen in the case of Chinese women of the upper classes, whose feet are made small by pressure. The method used to produce this horrible result—after all, no worse than wearing fashionable shoes with high heels and pointed toes—

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Foot of the Chinese woman of fashion.



is as follows: When the Chinese girl reaches her third year, the four smaller toes on each foot are bent down under the ball of the foot, leaving the great toe straight. The whole foot is then bound up tightly in this position, to make it pointed and very narrow, and to prevent any further growth. In walking, of course the child really walks on the knuckles of these toes, which causes them to become red and swollen, and the bandages cause great suffering to the victim. Fortunately the foot gradually conforms to the position, and in time the pain subsides. The toes, being inactive, cease to grow, and become almost a part of the ball of the foot, which by this time has assumed a rounded form with a point, the great toe, as its apex.

Another barbarous operation is performed, and of so severe a nature that it causes the death of many of the most delicate children. The foot is forced downward, until the point of the great toe almost touches the heel, and the whole foot is bound tightly in that horrible position. This bandaging is often removed, but never loosened; and the foot is bent more and more, month by month, until finally the great toe lies alongside of the other toes on the ball of the foot, and the whole bunch is actually doubled over into the arch of the

foot, where it remains. It is the "smallness" of this kind of "foot" which so often excites the envy of some of our fashionable women and shallow-pated men; the foot, of which they are so envious, being nothing but a stump, a bit of heel and a bit of toe, with a mark like a cicatrix between them.

Sometimes, when the parents are not wealthy, and the girl is compelled to work for a living, the foot is not bound; but such are the social customs of China that the girl considers natural feet a disgrace, and attempts to disguise the supposed deformity in every way. Often, on the marriage day, pieces of cork are strapped to the soles of the feet, and to these slippers are fitted. Of course these slippers are very small, and, protruding from beneath the dress, are supposed to deceive the guests. And this is only an aggravated form of "fashion."

The all-wise Creator formed human feet, and when the clothing of the feet is made to conform to nature, it is right; and not otherwise. Then, and only then, will it protect the feet from cold and injury, and not distort or crowd their structure in any way. This is of vital importance, as the condition of the feet powerfully influences the health of the whole body.



Boots and shoes should be long enough and wide enough to allow all five toes to lie in their natural position, without crowding. In the natural position, the great toe lies in a direct line from its point to the center of the heel; and if we force this toe out of line, the result is distortion. When this result has been accomplished, the boots or shoes should not be made to conform to the bent toe, but should be made as if the toe were straight; then the toe, afforded room, will gradually resume its natural position. If the shoe is made so that the toe is pressed outward by gentle pressure on its joint, this will greatly contribute to its resuming the natural position, if no inflammation exists in the joint.

Shoes which are too short are the greatest cause of distortion of the great toe, bunions, and ingrowing toe-nails.

The heels of boots and shoes should not be high and narrow, but low and broad, to give firm and steady support to the foot; and the last should be so constructed as to allow the heel to fit well down into the shoe, so that a very light pressure over the instep will keep the foot from slipping forward.

The soles of walking-shoes should be rather heavy, but for house or carriage wear may be con-

siderably lighter. Heavy soles protect the feet from dampness, and from being bruised by uneven surfaces; light soles are no protection whatever from either, and are the cause of corns and callosities on the soles of the feet.

The upper part of the boot or shoe, of whatever material it may be made, should be sufficiently loose across the toes to allow the great toe to retain, or resume, if distorted, its natural position.

If the heel of the foot has been allowed to sink into the heel of the shoe, by a proper construction of the last, and if the arch of the foot is properly supported by an elevation of that part of the sole called the shank, under the arch, very moderate pressure over the instep will be sufficient to keep the foot in its proper place, thus making walking easy and pleasant.

Shoemakers are often ignorant of the principles on which the construction of foot-wear is based; but more frequently are wholly ignorant of the character of the complex organisms on which their art is bestowed. Almost invariably they adhere blindly to the usages and forms which are prevalent, and endeavor to follow the style or fashion as well as they can.

Many of our women, with beautiful hands and forms, and faces of almost perfect contour, have

feet quite as badly deformed as the various cuts represent.

The author hopes that the facts and principles he has set forth will lead his readers to care properly for their own feet and those of their children.

## Chapter Eleven

ADDITIONAL RECIPES AND THEIR  
USES

For Simple Chilblains—To Remove Corns—To Remove Warts—To Remove Soft Corns—For In-growing Toe-Nails—For Perspiring Feet—Cold and Clammy Feet—For Hard Corns and Callosities—Use of Antiseptics and Instruments.

**I**N addition to the remedies and treatment given for use in the various diseases of the feet, there are many others that are just as good, and which will effect a cure just as quickly. To some they may prove more desirable, so I append a few of the most important.

For inflammatory conditions :

(1) A warm carbolic acid dressing which is recommended throughout the preceding pages for inflammatory conditions is made and applied as follows :

Add to one (1) quart of hot water one (1) or

two (2) teaspoonfuls of carbolic acid. Mix thoroughly.

This is to be applied to the inflamed area on cloths of some soft material like gauze, and the gauze held in place by a bandage. Every twenty or thirty minutes the dressing should be moistened by the addition of some of the solution squeezed into the dressing from a sponge.

The solution must be kept warm.

Before operating knives, scissors or any kinds of instruments used in cutting corns or callosities must be very clean or sterilized before using.

Papier fayard can be used for bunions, especially when affected with rheumatics or gout; it can be applied to corns after they have been treated.

Cocoa-butter is excellent for the feet, especially when the skin is rough and dry, and should be rubbed in thoroughly after each bath.

For sore and sensitive feet use Dr. P. Kahlers' Sons salve for tender feet.

Pond's Extract or witch-hazel are excellent for burning feet. After each bath antiphlogistine will reduce swelling or pain in bunions, etc.; it can be used instead of poultices.

Ichthyol soap should be used for chilblains or eczema.

For a foot bath sea salt, borax or ammonia used in the water when bathing the feet will be found very refreshing.

For feet that perspire freely, bathe morning and evening in cold water, adding two tablespoonfuls of alcohol; also wear low shoes.

For cold feet, bathe in cold water morning and evening; after each bath, rub briskly; wear two pairs stockings.

To remove soft corns between the toes, take a small piece of sponge or cotton, saturated with spirits of camphor or with lemon juice; placing this on the corn for two or three nights, then bathe the foot in warm water, removing the corn with a dull instrument; this should be repeated until cured.

For ingrowing toe-nails, accompanied with proud flesh, first bathe the foot in hot water for ten or fifteen minutes; dry thoroughly, after which sponge the parts affected with hydrozone morning and evening; also remove imbedded nail with scissors, as described in Chapter V.

#### FOR CHILBLAINS.

Oil of mustard, 10 drops; alcohol, one ounce. Rub into the affected part with hand.

## FOR LAME OR TIRED FEET AFTER BATH.

One ounce each of glycerine, spirits of camphor and spirits of chloroform; alcohol, 3 ounces; oil of rose, 10 drops. Rub in after bath.

One ounce each of tincture of arnica, witch-hazel and alcohol. Rub in after foot bath.

## REMEDIES FOR SIMPLE CHILBLAINS.

I. Dissolve one ounce of sulphate of zinc in one pint of water, and bathe the affected parts several times daily until cured.

II. Use hydrochloric acid; dilute 10 per cent.; sponge parts affected morning and evening after each bath.

III. A mixture of one part kerosene oil and two parts common olive oil, rubbed into the foot morning and evening, will prove a quick and effective remedy.

## TO REMOVE COMMON CORNS.

When small in size, an effective eradicator will be found in nitrate of silver (lunar caustic). Merely wet the corn and touch it with a pencil of caustic every evening before going to bed, the

feet having been previously bathed in warm water.

### TO REMOVE WARTS.

I. Dip the end of a pencil of lunar caustic in a little water, and touch it to the warts, daily. In the course of a week or so the warts will entirely disappear.

### FOR HARD CORNS AND CALLOSITIES.

℞ Acid salicylic.....3i  
 Extr. cannab. ind..... gr.x.  
 Collodii..... ʒi

M. Sig.—External use.

Paint the corn or callosity with a camel's-hair brush two successive nights, the third night bathing the foot in hot water; then carefully pick away the softened parts. This can be repeated in one week if necessary.

The following recipes I have used in my own profession, and any of the said compounds mentioned in this book can be had on application to Dr. P. Kahler's Sons.

All kinds of chiropodist instruments, such as nail clippers, scissors, corn knives, corn and nail files, complete sets of instrument cases; also




salves, antiseptics, all kinds of instep supporters for flat feet, the right and left stockings, broad sole boots and shoes, for comfort, made on hygienic principles, can be had at the store.

## Chapter Twelve

## SUNDRIES

Abraham Lincoln—The Sandal Shoe—Right and Left  
Stocking—Foot and Stocking Cut Combined—Things  
Not to Do.

## ABRAHAM LINCOLN.

BRAHAM LINCOLN was six feet and four inches in height, had a very large foot and wore large, easy boots; he could use his brains and did so. Dr. P. Kahler, deceased, measured his feet, and made boots for him during the war. The drawing taken by the doctor can be seen at the store.

Great writers and business men have said, "When my feet trouble me, I cannot use my brain, consequently, I am not fit for business."



Various styles of sandals worn in the fifteenth and seventeenth centuries.



## THE SANDAL SHOE.

The cuts illustrate the form of sandal worn in the Fifteenth and Seventeenth centuries. Then the toes were entirely uncovered. The sandal shoes were made of different materials, styles and colors, light or medium tops, with a good sole, broad toes and no heels, thus giving plenty of room for the five toes, with freedom and air to the feet, and affording health and strength to the body, as well as to the feet.

Then why not give the same opportunity to the feet in this Twentieth Century by wearing shoes with broad soles and toes, and with low heels for health and comfort. If parents do not wish to do this, they should provide their children with the only proper shoes, so that they may have perfect and sound feet, and find ease and comfort in either standing or walking.

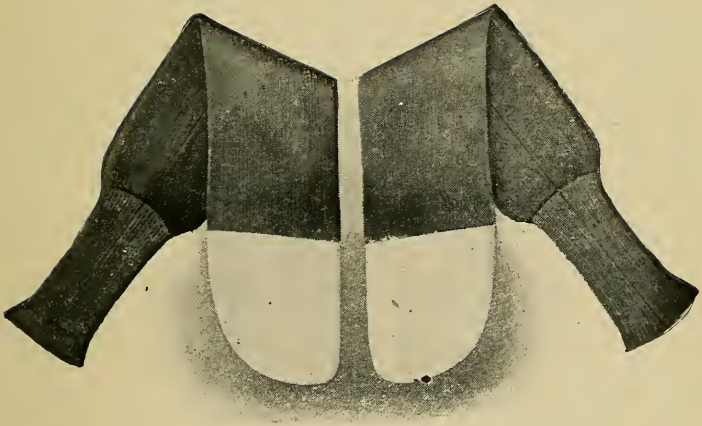
## THE RIGHT AND LEFT STOCKING.

That the wearing of narrow-toed stockings is harmful to the feet has been proved by thousands of cases.

It must not be supposed that materials as soft as these cannot change the shape of the feet, for a steady pressure can distort and misplace joints, and cause ingrowing toe-nails.

The right and left stockings should be worn, for the reason that they are made to fit each foot, and are so shaped that though not cramping the toes, they fit snugly and may be worn with any style of shoe; they will therefore give more comfort than is possible with stockings of the usual shape. These stockings are made with white feet to the instep, and being made straight on the inside give ample room for the great toe, and as there is no pressure they wear very much longer.

These stockings are made for men and women.



The Right and Left Stockings.  
Manufactured by Dr. P. Kahler's Sons.

1870  
1871  
1872  
1873  
1874  
1875  
1876  
1877  
1878  
1879  
1880



## How We Came to Adopt the System of Boots and Shoes

**I**N the practice of our profession we found great difficulty in procuring properly constructed boots and shoes. After restoring the foot to a healthy condition, it would happen that the improperly made shoe which they persisted in wearing would bring back the original difficulty, or something as bad or worse. None can doubt that most of the diseases and deformities of the feet of which I have spoken, and under which so many suffer, are directly or indirectly caused by want of knowledge or by want of thought on the part of those who call themselves "Boot and Shoe Makers." They are in ignorance or they are regardless of the principles on which the clothing of the feet should be constructed. Not comprehending the anatomy and physiology of the complex organism on which their labor is bestowed, they either blindly stick to the usages and forms in which they were trained or which have become prevalent, or follow the fashion, however irrational or unhealthy the paths through

which it may lead. Too often, however, the fault is with the wearer, who will obstinately and unwisely insist on wearing shoes too short or too narrow, and sometimes both; thus crowding five toes into a space not sufficient for three, and, in many cases which I have seen, not allowing for the entire five room enough for two. The boot-maker, who thinks he must please the customer, to retain his patronage, complies. The result is that the joints of the great toes are pressed out of place, made inactive and powerless, and often almost paralyzed. Ingrowing nails are caused in the same way, and corns, both soft and hard. Shoes too narrow or shoes too short produce great evils; but shoes or boots both narrow and short give Nature no opportunity to protect herself, and, as though incensed beyond endurance, she revenges herself upon the violator of law, filling him with unceasing and insupportable pains. Heels much too high and placed under the arch of the foot cause other evils, besides aggravating such as have been already described: the body is thrown forward and kept in an unnatural position, and the knee peculiarly affected. The connection of the knee with the nervous system is well known to physicians. Nothing weakens a man more than any difficulty of the knee; nervous excitement,



The white dots on this cut show the shape of the stocking as well as the pointed shoe worn at the present time ; to have comfort persons must wear broad toe stockings as well as shoes.



especially fear, is spoken of as "weak knees." With such heels the action of every muscle employed in walking or in maintaining the erect posture of the body, is interfered with. The evil effect extends to parts of the body which would naturally be thought farthest removed from injury from such a source. A leading oculist, not long since, after many experiments, traced an obstinate difficulty of the muscles of the eye to the effect of the long wearing of improperly made shoes.

This physician under no circumstances would treat any persons that would insist upon wearing high heeled shoes.

### THINGS YOU OUGHT NOT TO DO IN REGARD TO FOOT-WEAR

1. Never wear a shoe that will not allow all of your five toes to have plenty of room.

2. Never wear a shoe that the sole is narrower than your foot.

3. Never wear a shoe that pinches your toes.

4. Never wear a boot or shoe that is tight anywhere. It stops the flow of blood and weakens the muscles.

5. Never wear a shoe that is too large in the heel or instep. Friction is as bad as pressure.

6. Never wear high heels, as they will, in time, give you headaches. Your eyes will trouble you, the spine will become weakened and your internal organs will become misplaced.

7. Never allow your children to wear heels. It weakens the ankle, and it causes the arch to become flat. A spring heel is the shoe.

8. Never wear one pair of shoes all the time, unless you are compelled to do so. Two pairs of shoes worn a day at a time, alternating, gives more comfort and are much more healthful.

9. Never think that your feet will grow larger from wearing broad-toed shoes. Pinching and distortion makes them grow not only larger, but unsightly, and imperils the health.

10. Never wear a short or pointed stocking; you must bear in mind that they shrink. Narrow or pointed stockings are as injurious as a shoe made on the same principle. The right and left stockings are the correct ones. Avoid colored stockings over the toes and the sole of the foot.

11. Never mind the fashion. Do not shrink from being laughed at by the ignorant. Wear the shoe that gives you comfort and health.

12. Never avoid bathing the feet too often, as cleanliness is next to Godliness.

## PEDIC SOCIETY

Members of the Pedic Society of the State of New York are known as Doctors of Chiropody, are entitled to practice in this State or in any other. Since 1895 the law compels every person wishing to practice chiropody in this State to appear before the Medical Board of Examiners to qualify. If the examination prove satisfactory, a diploma will be given entitling its possessor to practice on the same conditions as required of any physician of the State known as surgeon-chiropodist.

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Worn-down heels and crooked shoes produce corns and other maladies of the feet.

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All veterinary doctors and horse fanciers are interested in the proper shoeing of their horses. Therefore we should see that our feet are properly shod.



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**SURGEON-CHIROPODISTS**

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Our Feet

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